Introduction to Licensure and Certification of Health Care Entities

The Health Facilities and Emergency Medical Services Division (hereinafter "Division") inspects health care entities for compliance with regulatory and statutory requirements for state licensure and Medicare/Medicaid certification.

State Licensure

State law specifies the types of health care entities that must be licensed prior to providing services in the state.

The Division issues licenses for the operation of health care entities in accordance with Sections 25-1.5-103 and 25-3-101, C.R.S., et. seq.; with the exception of assisted living residences, that are also subject to Section 25-27-101, C.R.S., et. seq., and home care agencies that are subject to Section 25-27.5-101, C.R.S., et seq. Licenses are renewed annually, except for facilities for the developmentally disabled that are licensed biennially. The goal of licensing is to ensure that health care entities meet minimum standards of services and quality in compliance with state law and regulations.

Health care entities are required to pay non-refundable fees specific to the provider type. Publicly owned health care entities are <u>not</u> required to pay licensing fees.

Medicare/Medicaid Certification

Health care entities interested in serving Medicare/Medicaid clients must be federally certified. The goal of certification is to measure the provider's ability to deliver care that is safe and adequate, in accordance with state and federal law and regulations.

Medicare Certification for Certain Providers

There are many providers, including but not limited to physicians, clinical social workers, and therapists in private practice who are not listed in Table 1 because their Medicare certification is not handled by the Division. Such providers must initiate certification by completing an <u>8551</u> and submitting the application to the appropriate Medicare fee-for-service contractor for Colorado. (Click here for a list of contractors.)

The federal Centers for Medicare and Medicaid Services (CMS) delegates through contracts the responsibility for the inspection and/or certification of providers and suppliers to several agencies. The Division is one of the designated contractors for inspections in Colorado. Generally, the Division inspects entities for compliance with federal standards and then makes recommendations to CMS regarding certification. However, for entities that participate in Medicaid programs but do not serve the Medicare population, the Division makes the recommendation to the Colorado Department of Health Care Policy and Financing, which in turn determines whether or not to certify the provider.

Application for Licensure/Certification

If you are interested in applying for licensure or for Medicare/Medicaid certification, send <u>a letter of intent</u> to the following address:

CDPHE, HFEMSD-A2 Attention: Licensure/Certification Application 4300 Cherry Creek Drive South Denver CO 80246-1530

Additional information. For questions about obtaining:

- licensure, call the Licensure Customer Assistance Line during regular business hours at 303-692-2836 or email your questions to health.facilities@state.co.us.
- Medicare certification, ask about the specific health care entity when you call the Division's front desk at 303-692-2800
- Medicaid certification, access the Colorado Department of Health Care Policy and Financing website regarding Medicaid provider enrollment